## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

indicated unless corrects maintenance fee notifica	ed below or directed oth	icrwise in Block I, by (	a) specifying a new corres	pondence address; and/or (	b) indicating a sepa	arate "FEE ADDRESS" for	
CURRENT CORRESPOND	ENCE ADDRESS (Note: Use BI	ock I for any change of address)	Fcc(	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
PASTEL LAW 8 PERRY LANI 1THACA, NY 1	FIRM	01P	E 4 State addr trans	Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
		NON		(Depositor's name)			
		1				(Signature)	
		A COL	RADELLE			(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	ATTOR	NEY DOCKET NO.	CONFIRMATION NO.	
10/085,379 02/28/2002 Hiroshi Koh JP920000402US1 6562 FITLE OF INVENTION: MACHINE TRANSLATION SYSTEM, METHOD AND PROGRAM							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	\$300	so 11/21/2007	7 AWONDAY 2 8000	9052 090457 10085375	
EXAMINER ART U		ART UNIT	CLASS-SUBCLASS				
SKED, MATTHEW J 2626			704-007000	02 FC:1504			
CFR 1.363).  Change of corresp Address form PTO/Si  For Address" ind	ication (or "Fee Address"	nge of Correspondence	or agents OR, alternative (2) the name of a single registered attorney or a	s of up to 3 registered patent attorneys, alternatively, of a single firm (having as a member a omey or agent) and the names of up to battern attorneys or agents. If no name is			
PLEASE NOTE: Unit recordation as set fort (A) NAME OF ASSISTMENTALO	ess an assignee is ident h in 37 CFR 3.11. Comp GNEE Wal BUSINES	ified below, no assignee oletion of this form is NO assignees.  S Machines	(B) RESIDENCE: (CITY	c) stent. If an assignee is identsignment, and STATE OR COUNTR  AMON Individual M Corporation	", NY		
is. The following (cc(s))  Signal State  Signal State  Publication Fee (N  Advance Order - 1	lo small entity discount p		A check is enclosed.  Payment by credit care	If Fcc(s): (Please first reapply any previously paid issue fee shown above)  it is enclosed.  It by credit card. Form PTO-2038 is attached.  The property authorized to charge the required fcc(s), any deficiency, or credit any ment, to Deposit Account Number 09-045 (cnclose an extra copy of this form).			
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Authorized Signature	Cut	her R. Aus	tel	Date Septe Registration No.	mber 2: 37.694	5,2007	
his collection of inform n application. Confident ubmitting the complete is form and/or suggestion ox 1450, Alexandra, V. lexandria, Virginia 223	13-1430.			etain a benefit by the public mated to take 12 minutes to dual case. Any comments of THIS ADDRESS. SEND			